

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			04-30-99
O.I.P.E. CLASSIFIER		15918	5-17-99
FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim		Date	
Final	Original		
1	✓	12/15/00	
2	✓	12/14/00	
3	✓	7/3/01	
4	✓	6/17/01	
5	✓	11/9/01	
6	✓	8/22/02	
7	✓		
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49	✓		
50	✓		

Claim		Date	
Final	Original		
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Claim		Date	
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If more than 150 claims or 10 actions  
staple additional sheet here

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